

# Medical Education Update: March 2019

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**Trust Board paper K**

## Executive Summary

### Context

Provision of high quality education and training is an essential part of promoting UHL as an excellent training organisation and to support recruitment and retention of students and all healthcare staff.

This report gives an update on recent feedback from National and local surveys relating to undergraduate and postgraduate medical education – significant improvements have been made in improving the outcomes over recent years and overall trainee and student satisfaction has improved.

The establishment of a strong learning culture and a supportive training environment with good education facilities will support UHL's care delivery and patient safety by delivering a well-trained and motivated workforce.

### Input Sought

For information:

UHL has successfully bid for £305,133 of HEEM funding to support education and training this year.

We would welcome the Board's support for:

1. Addressing the issues identified in National and local surveys re medical education and training, and
2. Supporting the ongoing placement of Physician Associate students in UHL.

# For Reference

Edit as appropriate:

1. The following objectives were considered when preparing this report:

Safe, high quality, patient centred healthcare	[Yes /No /Not applicable]
Effective, integrated emergency care	[Yes /No /Not applicable]
Consistently meeting national access standards	[Yes /No /Not applicable]
Integrated care in partnership with others	[Yes /No /Not applicable]
Enhanced delivery in research, innovation & ed'	[Yes /No /Not applicable]
A caring, professional, engaged workforce	[Yes /No /Not applicable]
Clinically sustainable services with excellent facilities	[Yes /No /Not applicable]
Financially sustainable NHS organisation	[Yes /No /Not applicable]
Enabled by excellent IM&T	[Yes /No /Not applicable]

2. This matter relates to the following governance initiatives:

Organisational Risk Register	[Yes /No /Not applicable]
Board Assurance Framework	[Yes /No /Not applicable]

3. Related Patient and Public Involvement actions taken, or to be taken: [Insert here]

4. Results of any Equality Impact Assessment, relating to this matter: [Insert here]

5. Scheduled date for the next paper on this topic: [XX/XX/XX] or [TBC]

6. Executive Summaries should not exceed 1page. [My paper does / does not comply]

7. Papers should not exceed 7 pages. [My paper does / does not comply]

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

**REPORT TO: TRUST BOARD REPORT**

**DATE: 7 MARCH 2019**

**REPORT BY: Mr ANDREW FURLONG, MEDICAL DIRECTOR**

**REPORT FROM: PROFESSOR SUE CARR, DIRECTOR OF MEDICAL EDUCATION**

**SUBJECT: UHL MEDICAL EDUCATION REPORT**

**Medical Education Update**

Education & Training Facilities

Ensuring good education facilities is an important factor in maintaining the Trust’s profile as a teaching hospital. Demonstrating a commitment to education and helps to attract and retain high quality doctors to train and work in Leicester.

Over recent years, the education facilities at UHL have been criticised by medical trainees in the GMC National Trainee Survey and there is an increasing requirement for simulation training for all postgraduate healthcare professionals and students which requires additional space. The reconfiguration of services has also led to an imbalance of education and training facilities across our 3 sites which will be further exacerbated as services moves continue.

A medical education and training facilities strategy has been developed and discussions are in progress with University of Leicester about future developments on the LRI site.

**Postgraduate Training: Survey Updates**

GMC National Trainee Survey 2018

As a trust overall, UHL has no red flags in the 2018 survey.

Trust / Board	Overall Satisfaction	Clinical Supervision	Clinical Supervision out of hours	Reporting systems	Work Load	Teamwork	Handover	Supportive environment	Induction	Adequate Experience	Curriculum Coverage	Educational Governance	Educational Supervision	Feedback	Local Teaching	Regional Teaching	Study Leave	Rota Design
Chesterfield Royal Hospital NHS Foundation Trust																		
Derby Teaching Hospitals NHS Foundation Trust																		
Kettering General Hospital NHS Foundation Trust																		
Northampton General Hospital NHS Trust																		
Nottingham University Hospitals NHS Trust																		
Sherwood Forest Hospitals NHS Foundation Trust																		
United Lincolnshire Hospitals NHS Trust																		
University Hospitals of Leicester NHS Trust																		

UHL maintained a ranking of 3<sup>rd</sup> for ‘Overall Satisfaction’ in the East Midlands region

The table below provides a summary of the outcomes for UHL from the 2018 GMC National Training survey

Patient Safety and Bullying & Undermining Comments	Negative Outliers (Red Flags)	Positive Outliers (Green Flags)	Multiple Year Red Flags
8	75	38	4

Of UHL 75 red flags: 32 Closed by HEE, 43 Monitored, 0 Escalated

HEE have requested an update on actions taken for 5 of the red flags in 4 specialties (Clinical Oncology, Medical Microbiology, Sports and Exercise Medicine and Rheumatology)

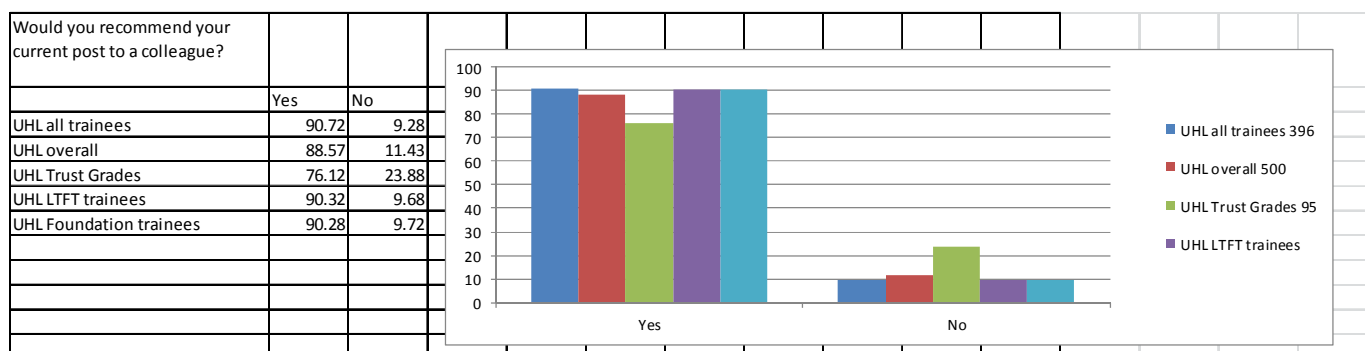
National Training and Education Survey (NETS). This multi-professional HEE survey was open during November 2018 and we expect to receive the quantitative results by mid-March. Learners were able to include free text comments/concerns related to patient safety and bullying/undermining; UHL received 2 comments related to bullying/undermining which require a response from the Trust and a further 4 comments which have been shared with the appropriate services for information purposes only.

#### UHL Survey summary (Sept 2018)

455 (50%) responses- 388 were trainees, 57 trust grades and 10 'other' (including MTIs and Fellows)

When asked 'would you recommend your current post to a colleague?' 88.57% of all respondents said 'yes' (Trust KPI is 80%). For the same question, 74% of specialties (with > 3 respondents) met or exceeded the KPI (see appendix for breakdown and comparison to March 18)

A further breakdown of grades/roles is shown below



### **Postgraduate Training Concerns**

Where concerns have been identified in the GMC or local UHL surveys, meetings with CMG Education Leads and Heads of Service are underway to investigate these further.

	Update- December 2018
Cardiology	The 2018 GMC survey showed improvement since 2017 at a HEEM revisit in May 2018 – a meeting to review progress was held January 2019

and Respiratory	Ongoing challenges were identified at the review meeting (cross cover for trainee clinics, Education Fellows not re-appointed)
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Winter pressures impacted on training in a number of ways last year but so far have had less impact on training this year following consultation with CMG education leads and Foundation Training Programme Leads

### **HEEM funding**

UHL trainers and educators submitted competitive bids to HEEM for Curriculum Study leave underspend funds to support training in UHL. We were successful in obtaining £ 180,133 to purchase a range of training equipment and to support development and delivery of innovative training courses for trainee doctors.

### **Return to Training programme (RTT)**

A successful bid was submitted to HEEM for £ 80,000

An increasing number of doctors in training are taking time out of their training programme. The reasons for this are varied and include, out of programme research and educational opportunities, caring responsibilities, career breaks. Evidence suggests that around 10% of doctors spend time out of programme at any point in the overall training programme. Trainees who take time out often feel uncertain about their return to training and are lacking confidence on their return and it has been recognised that targeted

University Hospitals of Leicester employs around 800 doctors in training working and we estimate that there are around 80 trainees at any one time who are considering, or actively, taking time out, or returning to training.

We have appointed an RTT lead to develop a sustainable programme which supports trainees returning to work. This will include the development of an expert faculty, administrative support and electronic resources.

### **Less than Full Time training (LTFT)**

A successful bid was submitted to HEEM for £45,000

Workforce projections suggest that increasing numbers of trainees will apply to work LTFT at some stage during their career.

UHL will strengthen and standardise the process of supporting LTFT doctors and has appointed a LTFT lead who will develop a sustainable programme to supports LTFT trainees working less than full time.

## **Undergraduate Medical Education Issues**

### **Medical students**

*National Student Survey*

Encouraging improvements in the Leicester Medical School NSS scores

*Overall satisfaction* - increased from 83% to 87%

Leicester is now 18<sup>th</sup> out of 33 medical schools reported on overall satisfaction

#### DMU Physician Associate Students:

From August 2018: 15+ 1<sup>st</sup> year (½ day week)  
12 2<sup>nd</sup> year PA students in clinical placements

We are experiencing difficulty placing students and providing clinical supervision in the Emergency department which is a mandatory placement. As medical student numbers increase alongside PA student places then training and trainer capacity needs to be carefully considered.

There is a need to create roles for newly trained PAs as per the UHL workforce strategy

#### **UHL as a Teaching Hospital**

A communications officer has been appointed to highlight the advantages to patients of being treated in a teaching centre and to promote UHL as a teaching centre of excellence to support recruitment and retention of medical staff.

Watch for campaigns and press releases – we have received some very positive feedback

@UHL\_ClinEd 

**Instagram: uhlclinicaleducation**

#### **Medical Education: On-going key priorities**

As a University teaching hospital, it is important that UHL provides high quality training to optimise recruitment and retention.

Reviewing placement capacity is important in light of increasing medical & PA student numbers

1. Continue to improve the learning culture within and the support for trainees wellbeing
2. Improve UHL education & training facilities
3. Facilitate “Time for training” in job plans
4. Improve accountability for funding we receive for education and training at CMG level
5. Manage education and training quality issues actively across UHL and commit to demonstrate improved education quality outcomes
6. Work with local universities to maximise our potential in educational innovation, and scholarship as a “USP” for Leicester